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FAX COVER SHEET

FAX NUMBER TRANSMITTED TO: (571) 273-8300

To: US Patent and Trademark Office
Art Unit: 1641
Examiner: Yu, Melanie J.
Serial No.: 10/567,233
First Inventor: Wusi C. Maki
Title: MOLECULAR DETECTOR
Filed: February 6, 2006
From: Howard Eisenberg
Previous Atty Docket No.: C12-IRF-2005003
Current Atty Docket No.: 814.0035
Date: August 24, 2009

DOCUMENTS	NUMBER OF PAGES*
Transmittal Form	One
Statement under 37 CFR 3.73(b)	One
Revocation of Power of Attorney with a New Power of Attorney	One
Denial of Request for Power of Attorney	One
Communication	Three
TOTAL PAGES (not counting cover sheet)	Seven

* NOT COUNTING COVER SHEET. IF YOU DO NOT RECEIVE ALL PAGES, PLEASE TELEPHONE US IMMEDIATELY AT (484) 412-8419.

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Doc Code: TRAN.LET

Document Description: Transmittal Letter

PTO/SB/21 (07-08)

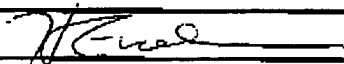
Approved for use through 07/31/2012. OMB 0651-0031

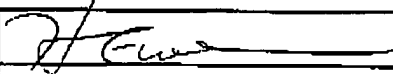
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/567,233	
	Filing Date	February 6, 2006	
	First Named Inventor	Wusi C. Maki	
	Art Unit	1541	
	Examiner Name	Yu, Meilan J.	
Total Number of Pages in This Submission	7	Attorney Docket Number	C12-IRF-2005003

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.63	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Statement under 37 CFR 3.73(b) Denial of Request for Power of Attorney Communication (3 pages)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Howard Eisenberg, Esq.		
Signature			
Printed name	Howard Eisenberg		
Date	August 24, 2009	Reg. No.	35,789

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Signature			
Typed or printed name	Howard Eisenberg	Date	August 24, 2009

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